DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: SERVITE WOOD (0009631)

Address: 8417 N SERVITE DR APT 102, MILWAUKEE, WI 53223

License Status: REGULAR

Licensed/Certified/Registered 09/06/2002

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0095793 End Date: 10/07/2005 Type: ABBREVIATED Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10007207 Served 11/02/2005

Deficiencies Cited Subject Area Compliance

Verified

88.05(4)(b)2 SMOKE DETECTORS-TESTING AND MAINTENANCE

Corrected